

CALIFORNIA STATE EMPLOYEES' CHARITABLE CAMPAIGN 2004 AFFILIATE APPLICATION



California Government Code section 13923 and Title 2, California Code of Regulations, section 663, govern the solicitation of State officers and employees for charitable purposes and allow for payroll deductions related to the solicitation. State officers and employees may be solicited only by a Victim Compensation and Government Claims Board (Board) approved Principal Combined Fund Drive (PCFD).

FORM INSTRUCTIONS

The following items must be returned to the Board in order to be considered for participation in the 2004 Campaign. The complete application must be postmarked no later than MARCH 15, 2004.

1. Complete sections I-II, **including an original signature**. Please print or type all information.
2. A **copy of your 501(c)(3) documentation**, including a letter from the IRS or other state issued documentation authorizing any legal name change.
3. **Return completed form** to your Principal Combined Fund Drive Federation: _____.

Please Note:

-  Facsimile applications will **not** be accepted.
-  Any blank areas may result in the application being returned for incompleteness.

Pursuant to the legal authority cited above, the following organization hereby applies to the Board as an affiliate member beneficiary of a PCFD for the 2004 California State Employees' Charitable Campaign (Campaign):

I. ORGANIZATION INFORMATION:

Legal name as recognized by the I.R.S. as 501(c)(3) exempt; also any changes must include supporting documentation, i.e., doing business as statement or fictitious business name statement.

PHYSICAL ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE NUMBER: _____

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(Please do not use letters.)

II. CONTACT INFORMATION:

PRIMARY CONTACT: _____

(name and title)

EMAIL ADDRESS: _____

WEB PAGE ADDRESS: _____

PCFD FEDERATION: _____

2004 AFF

Board Use ONLY:

CSECC ID Number: _____

III. DESCRIPTION OF ACTIVITIES**New Applicants**

Please provide a statement, no greater than 25 words in length,¹ describing your organization's activities. DO NOT include the name of your organization in your statement. Your web address may be included and will not be counted as part of the 25 words. This statement will be included in the local Campaign Brochures.

Sample appearance in brochures:

0000 Name of Organization

Address

Phone no.

25 Word Description

Fundraising and Administrative fees %

Previous Applicants

Modifications may be made by lining out information and writing in the desired wording. A separate sheet may be attached, if necessary.

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No changes are necessary. Please continue to use the previous statement.

IV. AS CONDITIONS FOR APPROVAL OF THIS APPLICATION:

We certify under penalty of perjury:

- 1) That we are currently a charitable organization qualified as "exempt" under section 23701d of the California Revenue and Taxation Code **and** paragraph (3) of subsection (c) of Section 501 of the Internal Revenue Code of 1954; and
- 2) That we are in compliance with the provisions of the California Fair Employment and Housing Act, Part 2.8 (commencing with section 12900).

**DO NOT SUBMIT THIS APPLICATION UNLESS IT IS COMPLETE;
INCLUDING ANY REQUIRED DOCUMENTATION**

Original Signature of Authorized Officer (blue ink preferred)

Date

Typed or Printed Name of Authorized Officer

Authorized Officer Title

CSECC law, rules and policies, as well as copies of the application and instructions can be downloaded by visiting our website at www.boc.ca.gov/csecc.htm

¹ The Board will edit any statement that uses special fonts or exceeds 25 words.